

## SOUTH AFRICAN SHOW JUMPING

## **NOMINATIONS FOR THE OFFICE BEARERS – SASJ EASTERN CAPE**

**Nominating SASJ Club** 

## Nominee (Please print full name)

Nominee SASJ No	Nominee SAEF No	
Nominee Cell No	Nominee Email	

POSITION for which NOMINATED (Please indicate with an X)

PRESIDENT	
VICE PRESIDENT – with portfolio	
TREASURER	
ATHLETES COMMISSION	
COMMITTEE MEMBER	
(Name of Portfolio if applicable)	

Club confirmation: I hereby confirm the nomination and that the nominee is a member of the club and in good standing.

SIGNATURE of CLUB CHAIRMAN (or duly authorized person)

SIGNATURE of NOMINEE (accepting nomination) ID Copy to be attached of Nominee

IF APPLICABLE:

Name

Name

Name

Signature of Member Nominating Nominee

I hereby confirm, I am a member in good standing with SASJ, SAEF and a recognized SASJ Club.

Date

Date

Date